



Prevention Program Implementation and Evaluation Toolkit

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Prevention Program Implementation and Evaluation Toolkit

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Foreword



We developed the Prevention Program Implementation and Evaluation Toolkit to help our service members and civilians implement and evaluate effective prevention programs. The toolkit offers guidance on how to: (a) identify prevention programs and strategies that meet the needs of your audience, (b) adapt existing prevention programs for a particular audience, (c) develop evaluations to assess program impact and (d) successfully implement prevention programs.

Measuring a program's efficacy provides essential information towards adjusting or staying the course—to be more agile in the face of evolving challenges. Evaluation does not measure absolute failure or success of a program or initiative—it provides guideposts for innovation and informed decision-making. Our goal is to empower leaders at all levels with tools and resources to effectively improve the overall readiness of their organizations.

To produce desired results, we must implement prevention programs that promote skill-building, are culturally responsive, and directly address key behaviors and outcomes to achieve leadership goals and objectives.

We are committed to working closely with you.

Sincerely,

Melissa E. Cohen

Director

Department of the Navy

Sexual Assault, Sexual Harassment & Suicide

Prevention and Response Office

Acknowledgments

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Would you be willing to take a survey on how you used this resources?
Please contact us via email at: office_don_sapro.fct@navy.mil

Toolkit Introduction

This toolkit provides guidance for planning, implementing, and evaluating prevention programs. A principal aim of the toolkit is to emphasize the importance of measuring the impact of prevention efforts. In other words, is the program contributing to changing the outcomes that you have identified as important? The toolkit describes processes and procedures, primarily in the context of sexual assault prevention programs; however, it can be adapted to prevention programs that address other negative behaviors.

The toolkit is comprised of four chapters. Chapter 1, *Program Identification*, presents information about existing prevention programs and the levels of evidence to consider before choosing a prevention program. Chapter 2, *Program Adaptation*, offers recommendations for tailoring existing prevention programs to make them more relevant and engaging for the target audience (e.g., military personnel or civilians working in a military context). Chapter 3, *Program Evaluation*, provides guidance on how to evaluate prevention programs and covers both process and outcome evaluations. Finally, Chapter 4, *Program Implementation*, offers step-by-step instructions on how to successfully administer a prevention program.

CHAPTER I: Program Identification

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Identify Existing Prevention Programs that Were Impactful

The first chapter provides information on how to identify prevention programs and strategies that will meet the needs of Sailors, Marines, and civilians. This chapter also provides basic information about considerations for evaluating new and emerging programs, which will assist with selecting optimal prevention programs for your specific command situation.

Understanding the Role of Prior Evaluations in Program Identification

Programs (also referred to as “initiatives”) aimed at preventing sexual assault and other negative behaviors can take many forms including in-person programs, social marketing campaigns, video programs with a facilitated discussion, interactive theater programs, online programs, or a combination of these and other components.

Whether creating your own program or using or adapting an existing prevention program, a thorough understanding of the prevention program goals and how you will evaluate progress in meeting these goals is key to understanding if a program achieved its desired outcomes.

Ideally, a program evaluation reveals the effectiveness of a program—that is, whether it produced anticipated changes in participants’ knowledge, attitudes, skills and/or other outcomes of interest (e.g., reduction in sexual assault prevalence and reports, increased ability to recognize negative behaviors, increased awareness or observations of positive skill-building, etc.). Some program evaluations focus only on whether participants enjoyed or felt satisfied with the program; others capture gains in specific knowledge or skills. Comprehensive evaluations address several outcomes, such as the examples mentioned above.

Understanding Different Types of Evaluation: The Kirkpatrick Model

Prevention program evaluation often assumes a hierarchical structure. Lower levels of evaluation provide assessments of participant reactions, while more advanced evaluations indicate whether programs impacted critical outcomes. Researchers collect this evidence through feedback sessions, focus groups, surveys, and other measures. One evaluation model, the Kirkpatrick Model (**Table 1.1**; see also *Appendix B*), proposes the following evaluation levels:

Successful program identification relies on:

- ☐ Understanding the role of prior evaluations in program identification
- ☐ Understanding different types of evaluation
- ☐ Reviewing prevention program options
- ☐ Understanding levels of evidence





What are some of the key considerations for choosing a prevention program?

- ☐ Does the program have a high-quality evaluation report available for you to review?
- ☐ What does the evaluation report tell you about the effectiveness of the program?
- ☐ Is there a program administration manual?
- ☐ Can you get technical assistance from the developer?

For additional considerations, see *Appendix A*.



Table 1.1: The Kirkpatrick Model

<p>LEVEL</p> <p>1</p>	 <p>REACTIONS</p> <p>An evaluation that assesses if participants find a program satisfactory, engaging, relevant, or enjoyable. These evaluations often rate participant satisfaction regarding facilitation, program materials and program setting – these are the first steps in evaluating program effectiveness.</p>	<p>Example: <i>You are leading a team struggling with physical readiness and start a new physical fitness program. You have a kick-off session with your team and the new trainer to introduce the program. Afterwards, you gather your team's reactions: they feel motivated by the trainer and are confident their participation will increase their fitness. The team's buy-in is a solid foundation for staying committed to the fitness program, but you know they will have to put in the hard work to see results.</i></p>
<p>LEVEL</p> <p>2</p>	 <p>LEARNING</p> <p>An evaluation that assesses whether participant knowledge, skills, or attitudes have changed after participation in the program, defined in terms of learning objectives.</p>	<p>Example: <i>Your team has been involved in the new physical fitness program for the last month. A pre- and post-test indicates the team has increased knowledge on how to fuel their body for increased performance and how to vary their exercises to increase stamina. It is not clear if the team's behavior is impacted.</i></p>
<p>LEVEL</p> <p>3</p>	 <p>BEHAVIOR CHANGE</p> <p>An evaluation that assesses if participants are behaving differently by applying their knowledge to actions (e.g., eating appropriate foods, engaging in the prescribed exercises).</p>	<p>Example: <i>You check your team's fitness scores on a post-test assessment and to your dismay, there are no significant improvements. The team has the knowledge it needs to succeed, but this knowledge did not translate to behavior change. Examining pre- and post-test nutrition and exercise data show no change in individual eating habits and exercise routines. You apply the program's recommended course of action to correct these behavioral shortcomings.</i></p>
<p>LEVEL</p> <p>4</p>	 <p>RESULTS</p> <p>An evaluation that demonstrates an organizational performance change.</p>	<p>Example: <i>Three months into the program, you assess your team's physical readiness in terms of body weight and physical test scores. Team members have lost weight and have improved their physical test scores compared to the start of the program, and all the members passed their most recent physical readiness test.</i></p>

Understanding Levels of Evidence

Table 1.2 (see also *Appendix C*) summarizes the types of evidence typically discussed in an evaluation report (e.g., emerging, promising, evidence-informed, or evidence-based). These terms indicate the different levels of rigor used to determine program impacts. For example, the benefit of using an evidence-based program is that these programs have the most scientific support in terms of their impact on performance outcomes. Evidence-based programs are the ‘gold standard’ in prevention; however, they are not immune from shortcomings (e.g., non-representative samples, implementation fidelity, lack of cultural sensitivity).

Given few prevention programs were developed for military populations, leaders may opt for programs that incorporate elements of the latest research but do not meet the rigorous criteria for evidence-based approaches (e.g. evidence-informed and emerging evidence). Additional time, funding and testing are needed to garner sufficient data to meet “evidence-based” standards.

Finally, programs that have limited or no empirical support but are appealing based on initial or anecdotal feedback, have “practice-based evidence.” Though these programs may show initial potential, more research is needed to determine their impact on critical outcomes.

Table 1.2: Types of Evidence from Prevention Program Evaluations

Types of Evidence	Description
Unsupported or harmful	<ul style="list-style-type: none">• Evaluation results suggest the program had no impact on outcomes of interest or had unanticipated negative impacts on participants
Practice-based evidence	<ul style="list-style-type: none">• May or may not have been evaluated• In some cases, practitioners report that they have used the program and have observed positive effects• In some cases, evaluation has taken place, but the evaluation study designs have used broad inclusion criteria for participants, and field-based staff instead of trained researchers for evaluation
Emerging evidence/ Promising	<ul style="list-style-type: none">• Incorporates elements of other effective public health interventions• Borrows procedures from other evidence-based programs• Has not yet been evaluated or has been evaluated once using a small sample
Evidence-informed	<ul style="list-style-type: none">• Evaluated at least once or more• Used a quasi-experimental design—that is, a comparison group was used, but participants were not randomly assigned to the program or the comparison group
Evidence-based	<ul style="list-style-type: none">• Evaluated multiple times• Evaluations used an experimental design• Evaluation results have been published in peer-reviewed journals• Experts widely acknowledge and/or accept evaluation results• The evaluation studies show that the program produces positive results in more than one type of setting• Evaluation studies use a comparison or control group which means that positive outcomes can be more easily attributed to the program of interest rather than external factors



Considering Prevention Program Options

This section provides four primary points for considering whether to implement an existing prevention program:

Does the prevention program address outcomes of interest?

Previously evaluated programs are more likely to provide pertinent information, including evaluation reports, pre- and post-tests, information about how to deliver the program, and technical assistance from the developers.

An ideal evaluation of an existing program includes:

- Information about what individuals or teams will learn based on participation in the program
- Evaluation measures used to assess changes in critical outcomes; these may include pre- and post-tests (e.g., surveys), corporate data and direct observations
- Data that shows a significant impact on knowledge, attitudes, behaviors and results
- A comparison or control group of people who did not participate in the program from which data was collected

Other aspects of a well-executed evaluation include:

- Measures that have been previously tested by other researchers and provide reliable feedback for intended questions
- Information about the fidelity of implementation—that is, how the program deviated from the original implementation plan

- Detailed tables and charts that summarize and illustrate findings
- Discussions addressing the limitations of the evaluation

What do evaluation reports tell you about the effectiveness of the program?

Evaluation reports should indicate whether a program impacted outcomes that align with one or more of the four Kirkpatrick evaluation levels. Evaluations should provide evidence of changes in reactions, learning, behaviors, and results.

Prior evaluation research should also provide information regarding the rigor and scientific validity of the evaluation efforts. When available and appropriate for your target audience, evidence-based or evidence-informed programs should be selected because they have been evaluated previously using reliable methodology and have demonstrated effectiveness.

Evaluations should provide evidence of changes in knowledge, attitudes, behavior, and results.

Is there a program administration manual?

Determine whether there are any resources or written guidance on program implementation. If the program does not have an instruction manual or adequate advice for its administration, it weakens its case for implementation, although it may not rule out using aspects of such a program, especially if they are a great fit for your setting.

Can you get technical assistance from the developer?

If you have identified a program with sufficient evaluation support and implementation guidance, determine whether the program developers have publicly available resources that may inform your efforts. Program developers often share evaluation pre- and post-test surveys, and standard operating procedures used in their original evaluation trials.

KEY TAKEAWAY MESSAGES:

- Prevention program evaluations can range in rigor from a focus on foundational aspects of the program (such as participant reactions) to higher levels of evaluation approaches that assess changes in participant behavior and results such as reductions in risk factors (e.g., reduced sexual assault, decreased suicidal ideation, etc.).
- Program evaluation provides insight into whether a program is having the intended impact on participants and indicates which parts of the program that may need adjustment to achieve desired outcomes.
- Choose prevention programs based on outcomes of interest and the level of evaluation-related evidence available (e.g., participant reactions, learning, behavior changes, and results).

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Appendix A: Considerations for Choosing a Prevention Program

Command: _____ Date: _____

Considerations	Notes
Leadership Priorities are the key areas leaders want to impact or change through prevention programs. Leaders may be interested in reducing particular risk factors (i.e., prior victimization, alcohol, time of year) or in increasing skills for mitigating risk.	
Implementation Timing involves identifying times in the schedule that are most conducive to administer prevention programming.	
Implementation Approach. Some prevention programs are meant to be implemented as stand-alone programs; others may be integrated into existing training or leader development activities.	
Audience. Prevention program participants may differ in the knowledge and skills they need to learn based on rank, career specialty, current position, and/or prior exposure to prevention programs.	
Prior Exposure to Prevention Programming may include participation in previously administered programs, knowledge or skills acquired, perceived utility to mission performance and other factors that contribute to overall program success.	
Levels of Evidence indicate the level of rigor used to determine program impacts.	

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Appendix B: Kirkpatrick Model

Command: _____ Date: _____

Levels of Effectiveness	Description
Level 1 (Reactions):	<p>An evaluation that assesses if participants find a program satisfactory, engaging, relevant, or enjoyable. These evaluations often rate participant satisfaction regarding facilitation, program materials, and program setting – these are the first steps in evaluating program effectiveness.</p> <p>Example: <i>You are leading a team struggling with physical readiness and start a new physical fitness program. You have a kick-off session with your team and the new trainer to introduce the program. Afterwards, you gather your team's reactions: they feel motivated by the trainer and are confident their participation will increase their fitness. The team's buy-in is a solid foundation for staying committed to the fitness program, but you know they will have to put in the hard work to see results.</i></p>
Level 2 (Learning):	<p>An evaluation that assesses whether participant knowledge, skills, or attitudes have changed after participation in the program, defined in terms of learning objectives.</p> <p>Example: <i>Your team has been involved in the new physical fitness program for the last month. A pre- and post-test indicates the team has increased knowledge on how to fuel their body for increased performance and how to vary their exercises to increase stamina. It is not clear if the team's behavior is impacted.</i></p>
Level 3 (Behavior Change):	<p>An evaluation that assesses if participants are behaving differently by applying their knowledge to actions (e.g., eating appropriate foods, engaging in the prescribed exercises).</p> <p>Example: <i>You check your team's fitness scores on a post-test assessment and to your dismay, there are no significant improvements. The team has the knowledge it needs to succeed, but this knowledge did not translate to behavior change. Examining pre- and post-test nutrition and exercise data show no change in individual eating habits and exercise routines. You apply the program's recommended course of action to correct these behavioral shortcomings.</i></p>
Level 4 (Results):	<p>An evaluation that demonstrates an organizational performance change.</p> <p>Example: <i>The previous example hinted at the results of interest. Three months into the program, you assess your team's physical readiness in terms of body weight and physical test scores. Team members have lost weight and have improved their physical test scores compared to the start of the program, and all the members passed their most recent physical readiness test.</i></p>

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Appendix C: Types of Evidence from Prevention Program Evaluations

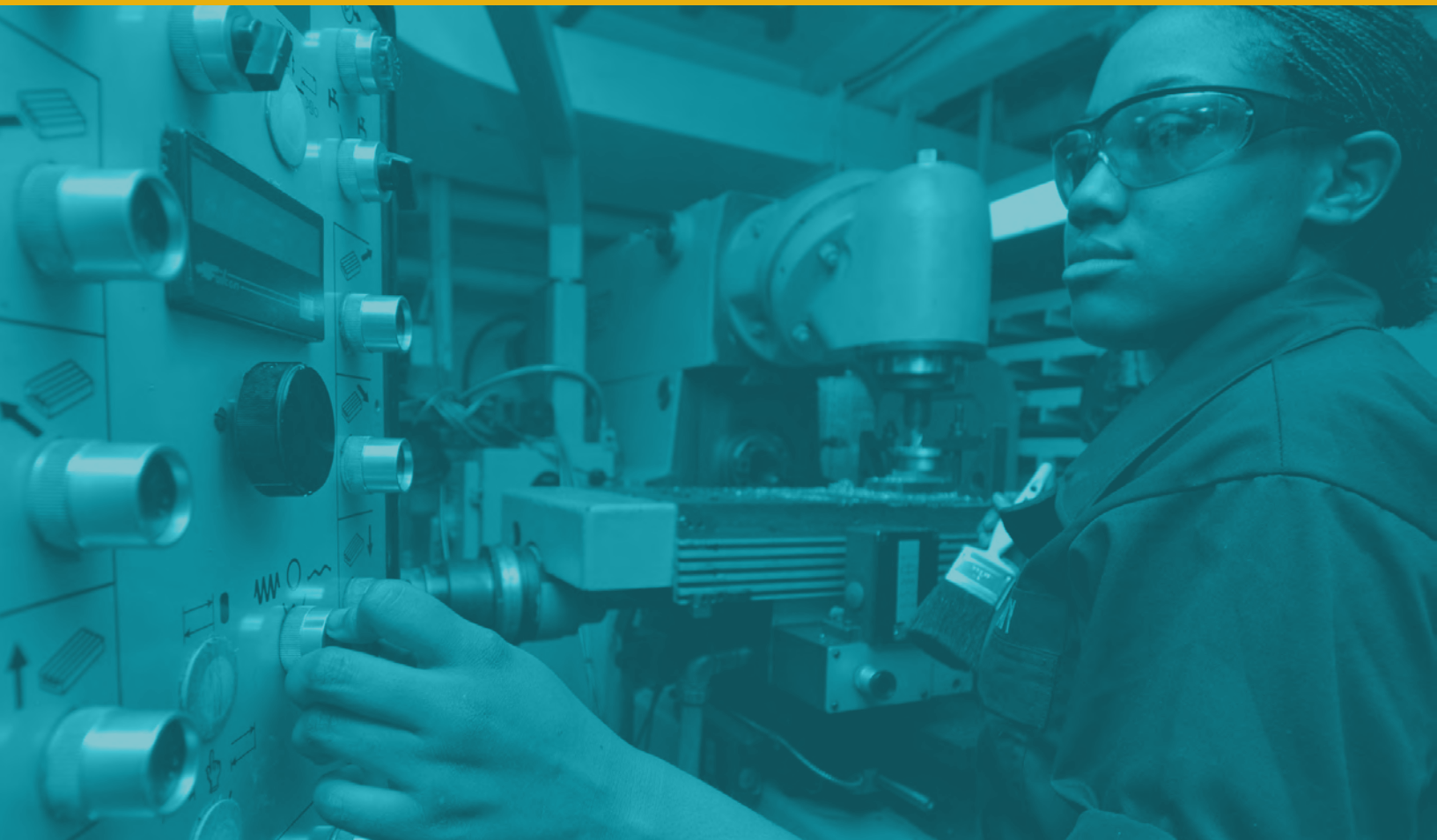
Appendix C provides a brief overview of the types of evidence gathered from program evaluations.

Types of Evidence	Description
Unsupported or harmful	<ul style="list-style-type: none"> Evaluation results suggest the program had no impact on outcomes of interest or had unanticipated negative impacts on participants
Practice-based evidence	<ul style="list-style-type: none"> May or may not have been evaluated In some cases, practitioners report that they have used the program and have observed positive effects In some cases, evaluation has taken place, but the evaluation study designs have used broad inclusion criteria for participants, and field-based staff instead of trained researchers for evaluation
Emerging evidence/ Promising	<ul style="list-style-type: none"> Incorporates elements of other effective public health interventions Borrows procedures from other evidence-based programs Has not yet been evaluated or has been evaluated once using a small sample
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Evidence-based	<ul style="list-style-type: none"> Evaluated multiple times Evaluations used an experimental design Evaluation results have been published in peer-reviewed journals Experts widely acknowledge and/or accept evaluation results The evaluation studies show that the program produces positive results in more than one type of setting Evaluation studies use a comparison or control group which means that positive outcomes can be more easily attributed to the program of interest rather than external factors

CHAPTER 2:

Program Adaptation

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Adapting Prevention Programs to the Audience Improves Its Potential for Success

Chapter 2 provides a framework for how to tailor available prevention programs to make them relevant and engaging for your target audience. This adaptation is the process of modifying the details of program implementation, or some of the content, to improve the outcomes that are of interest to you.

Identify Program Learning Objectives

Articulate precisely what participants need to learn from participating in a prevention program. Incorporating these elements into a formal structure helps shape communications with leadership and other stakeholders about what your program is aiming to accomplish.

Learning objectives are one-sentence statements about who will learn, what they will learn, and by when. Learning objectives should be specific, measurable, actionable and relevant.

For example, four learning objectives for readers who complete Chapter 2 are:

- (1) Identify the five key components of successful prevention program adaptations
- (2) Describe examples of program adaptations
- (3) Write examples of learning objectives
- (4) Demonstrate how to document program adaptations

In this example, who (readers) and when (upon completing this chapter) are identified in the introduction of the learning objectives. Numbers one through four cover what specific knowledge or skills participants are expected to learn. These are written with enough detail to assess whether participants met each learning objective.

If your prevention program is designed to close gaps in sexual harassment prevention knowledge, learning objectives for addressing these gaps could include:

- (1) Participants completing the program will be able to define sexual harassment behaviors.
- (2) Participants completing the program will be able to identify three methods for intervening in situations that involve sexual harassment.

Five Key Components for Successful Prevention Program Adaptation

- ☐ Identify program learning objectives
- ☐ Identify program participants
- ☐ Solicit recommendations for program adaptations
- ☐ Adapt the program to fit the audience
- ☐ Document adaptations



Knowing, at the onset, what you want participants to learn will help you identify and select relevant prevention programs. Learning objectives also help shape your program evaluation efforts by specifying desired outcomes to measure. See *Appendix D*, for a worksheet to help you define your learning objectives.

Identify Program Participants

A clear and thorough understanding of your program participants will help shape program adaptations. The advertising industry purposefully selects celebrities, music, colors, settings and other variables that they know will appeal to a specific audience. Customizing details of an intervention program to better suit an audience works in a similar fashion to improve the likelihood of achieving desired program outcomes. See *Appendix E*, for a worksheet to help you answer these important questions prior to program implementation.

Who are your program participants?

- ***What are the anticipated ages and ranks of the participants? If the prevention program is for an entire command, should junior and senior members receive the program at different times?***

Dividing the team into junior and senior groups might prompt you to modify program materials or the delivery style to better adapt to pre-existing knowledge levels about your topic.

- ***Would participants feel more comfortable in a program administered to single sex groups?***

Separate trainings for men and women may afford participants the opportunity to ask types of questions that they may not feel comfortable discussing in mixed-sex groups.

- ***Are examples in the program relevant to your participants' lives or culture?***

If a program uses scenarios based on a college classroom environment, Sailors or Marines may not think the program examples are relevant to their workplace. Familiar and identifiable program scenarios can increase program participant engagement. However, adaptations to existing prevention programs require the curriculum developer and their legal office to review and approve such modifications.

- ***Understand receptivity to previously administered prevention programs.***

Examine the aspects of prevention programs that resonated with team members and assess areas where program materials, exercises, or messaging were known challenges. Consider cultural or environmental factors (e.g., prior exposure to topic, operations tempo, impending leadership changes, current knowledge) that may influence how the program is administered.

- **When are the best times to engage your target audience?**

Ask leadership about potential scheduling conflicts. Scheduling a training or program at a time when participants might be distracted may reduce attendance and program engagement.

Where are the best places to administer your program?

Does the program space minimize distractions? Identify spaces that will reduce participant distraction.

Is there enough space for your program activities? The space should accommodate the prevention program. If needed, are there areas to divide the participants for small group discussions or activities such as role-playing?

Does the program include an interactive online component? Can the program be implemented virtually? To ensure engagement, it may be necessary to consider logistics of implementation when considering prevention programs.

Solicit Recommendations for Program Adaptations

Team members and former program managers can provide input that will assist in prevention program adaption efforts. Frame your questions to gather insights rather than simple “yes” or “no” answers. See *Appendix F*, for a worksheet to help you with your program needs assessment.

Former program managers

Former program managers are a great resource for sharing successful information related to program time, space and known challenges.

Example questions for program managers

- (1) Can you please describe prevention strategies that you used in the past that were successful?
- (2) Were there optimal times or places that contributed to the program’s success?
- (3) What aspects of the program resonated with leadership and participants?
 - a. Messages?
 - b. Content?
- (4) If you experienced any challenges, how would you prepare for them differently in the future?

Modify these questions accordingly for team member feedback.

Questions for program participants:

- (1) What suggestions do you have for increasing participation in program discussions?
- (2) What are some of the common scenarios that participants have struggled with during a program on (insert your topic)?
- (3) Do you have any example scenarios that you think we should include in the program?

Finally, consider previewing the program with a small group as a way of rehearsing for what will happen during implementation. Choose a small group of team members. Explain that you are in the process of adapting the program and want to informally administer the program and incorporate their feedback. This exercise will help you identify any potential issues with your program before you administer to the larger audience. As you pilot the program in this smaller setting, you should focus on questions that will provide descriptive answers rather than “yes” or “no” responses. (Note: Depending on the number of team members included in the pilot, it may be necessary to first obtain approval from your Service information collections office.)

Below are some questions for you to consider following your rehearsal session(s). See **Appendix G: Conducting a Pilot – Sample Questions**.

- (1) What did you learn from participating in the program?
- (2) How can we make this program more engaging for participants?
- (3) What changes would increase participation during discussion sessions?
- (4) How would you make the scenarios more realistic for the Sailors, Marines, or civilians?
- (5) What other reactions did you have to the program?
- (6) What could we do differently to be more effective?

Adapt the Program to Fit the Audience

Once you have identified program learning objectives and program participants, and sought suggestions for assessing program needs, the program can be adapted to fit the audience. Even the best prevention programs will not be a perfect fit across every type of setting and audience; however, tailoring a program, when needed, increases the chances that the program will be effective.

Examples of how programs may be adapted can include:

- Combine sessions so that the program is delivered in five, 60-minute sessions, instead of ten, 30-minute sessions
- Re-design or update the images used in a social marketing campaign to feature military personnel instead of college students

- Change the wording of a lesson or worksheet to be appropriate for 18 to 24-year-olds instead of 14 to 17-year-olds

Those are just a few examples, and there may be other types of modifications that you will want to consider.

The impact of adaptations on the program's effectiveness is the principal concern when considering changes. Such changes do not entail overhauling an existing program. Use your best judgment, document the changes, observe what happens during implementation, and then write about these experiences. See *Appendix H* for a worksheet to identify program adaptations.

- **WHO (audience):** How are my participants different from the originally intended audience? What changes might I need make in order to address these differences?
- **WHO (facilitator):** If the program used a facilitator to deliver a message in the original version, what was the training or background of the facilitator? What experiences should the facilitator have to be most effective at delivering the intervention to our team?
- **WHAT:** The original program likely includes topics or uses certain materials (e.g., handouts, posters, or videos) designed to resonate with the original audience. What topics or materials need to be included, modified, or removed?
- **WHEN:** How much time does the intervention require? When are the best opportunities to present the program?
- **WHERE:** Where is the most logical setting to deliver the program? How much space is required and what resources are needed for effective facilitation?
- **HOW:** If the original program used a media campaign, posters, or other handouts, how might changing the language or photos improve messaging to your audience?

The impact of adaptations on the program's effectiveness is the principal concern when considering changes.

Once you have determined the changes you want to make to the original program, it is time to take careful notes about what you plan to adapt, why the adaptations were made, and how participants respond to these adaptations.

Document Adaptations

Table 2.1 provides an example worksheet for tracking program adaptations. A blank worksheet is provided at the end of this chapter to help you document your adaptations (see *Appendix I*). It is important to clearly document how and why you adapted the prevention program, as well as the participants' reaction to each adaptation. This information is important for the next time the program is used, or when evaluating a program.

Table 2.1: Example Worksheet to Track Program Adaptations

Program Component	Adaptation Made	Program Participant Response
1) A scenario that program participants discuss takes place at a fraternity party at university	Adapted to take place at a restaurant or local bar that Sailors and Marines regularly frequent	Participants engaged in good discussion about the program example and related similar situations they encountered and actions they took or wished they had taken
2) A program activity requires discussion of how parents feel about alcohol use	Adapted the activity so that it no longer asks about parents, but asks about family more generally, intimate partners and peers	Many participants talked about parental attitudes towards alcohol, but the broader option to talk about family and peers seemed to make it possible for more participants to engage
3) A program-related video shows two teenagers engaging in bystander intervention	Added a discussion question following this video that asks participants to reflect on whether engaging as a bystander can be influenced by age, life experience, or culture	The discussion question about teenagers elicited some good discussion, though there was a possibility that participants could engage in stereotyping of younger team members during the conversation

Use **Table 2.1** to prepare briefings for your leadership during the approval process and post-evaluation and maintain an archive of adaptations to inform future intervention programs.

KEY TAKEAWAY MESSAGES:

- Once you have selected a program, review it carefully to decide how you will have to adapt it so that it is a good fit for your audience.
- Who are your participants, and what will appeal to them?
- Know what has worked or not worked before: Have you conducted an inventory of what prevention programming has already taken place and how it went with those efforts?
- When and where is the right place, and right time, to implement a program for the audience?
- Write learning objectives. Knowing up-front what you plan to achieve through any prevention program will help guide your selection of a program.
- Adaptations to existing Service programs and/or curriculum require the program/curriculum developer and their legal office to review and approve modifications.
- Document how and why you made adaptations so that you can investigate whether those were good choices and write about them after the program has been implemented.

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Appendix D: Identifying Program Goals & Learning Objectives

“Learning objectives” are statements that summarize the knowledge, skills, attitudes, or behaviors your audience will gain from participating in the program.

Command: _____ Date: _____

Program or Curriculum Name:

What knowledge gaps does your program address?

What skill gaps does your program address?

What immediate outcomes or behaviors are you trying to impact?

What are the long-term goals or results you expect from program participation?

Learning Objective 1:

Learning Objective 2:

Learning Objective 3:

Learning Objective 4:

Learning Objective 5:

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Appendix E: Preparing for Program Implementation

Command: _____ Date: _____

1. Who is your target audience? *(Target rank of participants)*

E1-E3	<input type="checkbox"/>	O1-O3	<input type="checkbox"/>	Civilians	<input type="checkbox"/>
E4-E6	<input type="checkbox"/>	O4-O6	<input type="checkbox"/>	Civilian Supervisors	<input type="checkbox"/>
E7-E9	<input type="checkbox"/>	O7-O10	<input type="checkbox"/>		

2. Will the audience be mixed or split by occupational specialty, rank, or gender? Yes ☐ No ☐

3. Are the examples and scenarios in the material relevant to your target audience? Yes ☐ No ☐

4. What prevention programs have been administered to your population previously?

4a. How were they received by that population?

4b. What challenges were identified?

5. What are the best places to engage your target audience?

6. Does the space minimize distraction? Yes ☐ No ☐

6a. Are participants in a separate room from peers? Yes ☐ No ☐

6b. Are participants away from their desks, emails, phones? Yes ☐ No ☐

7. Is there enough physical space for your program activities? Yes ☐ No ☐

7a. Does the space need to allow for small group discussion? Yes ☐ No ☐

8. Can the program be conducted in an online format? Yes ☐ No ☐

9. Who will facilitate the scenarios/breakout exercises?

10. What are the best times to engage your audience and reduce distractions?

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Appendix F: Needs Assessment

Command: _____ Date: _____

Questions regarding prior prevention program efforts:

1. Describe strategies that you believe helped contribute to the success of prior prevention program efforts.

2. What aspects of the prevention program were challenging? What recommendations do you have for future efforts?

Questions for team members and/or leaders:

1. Is there anything you would modify or any additional information you would include in the learning objectives?

2. Are there any other examples or scenarios that you would suggest including?

3. How would you facilitate the conversation, so people feel comfortable participating in the program discussions?

4. The program I am planning focuses on (insert your topic). What are some of the common scenarios that team members are challenged by in terms of this topic?

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Appendix G: Conducting a Pilot – Sample Questions

Command: _____ Date: _____

Curriculum: _____

1. Please list the three takeaway messages you have from participating in the program:

1. _____
2. _____
3. _____

4. Describe what you learned from participating in the program.

5. Describe the skills you learned in the program that you would use in your Command.

6. What are some suggestions for making this program engaging for the Marines, Sailors, and/or civilians in your Command?

7. Describe recommended changes to the discussion questions to increase participation from members of your team.

8. What changes would you make to the scenarios (or examples) so that they are more realistic for the Marines, Sailors, and/or civilians in your Command?

9. Please describe any other reactions that you have to the program and how we should change the prevention program?

.....

Prevention Program Implementation and Evaluation Toolkit

Appendix H: Needs Assessment

Command: _____ Date: _____

WHO (audience):

- Who was the original program audience? _____
 - How is my audience different? _____
 - What changes might I need to make because of the current audience demographics verses the original audience demographics?
- _____

WHO (facilitator):

- What was the training or background of the person delivering the original intervention (if it is an in-person or class-style intervention; this would not apply if it is a social marketing campaign)?

- Would my audience be more likely to care about a program delivered by someone that they could relate to more strongly?

- What kind of person (military, civilian, officer, enlisted, etc) is going to be most effective delivering this intervention in our local context?

WHAT:

- The existing prevention program likely covers certain topics or uses certain materials that are designed to resonate with the original audience. Are there topics or materials to add or subtract for your audience?

- Are there any materials (e.g., media campaign, videos, handouts) that you would like to edit or change?

WHEN:

- Think about the number of hours and sessions that the original program used and consider whether you might need to adapt the length or timing.
-

WHERE:

- Where was the original program delivered? _____
 - How is my setting different? _____
 - What changes might I need to make because the current location differs from the original setting?
-

HOW:

- The original program may have used language that was familiar to the original audience.
 - Are there ways in which you might want to consider changing the language used (for example, customized for service members and civilian employees, as opposed to civilians in the public sector)?

 - Are there images or other materials that might need to be updated to align with the current environment or to match what will resonate for your audience?

 - Are there certain words or messages that team members are tired of hearing that should be substituted with language that is more acceptable?

-
-

Prevention Program Implementation and Evaluation Toolkit

Appendix I: Documenting Adaptations

Command: _____ Date: _____

Number of Participants: _____ Time: _____

Use the below grid to prepare a one-page report summarizing any program adaptations you made to an existing prevention program based on participant feedback. Remember to include the date, time and number of participants and any feedback received from participants.

Program Component	Adaptation Made	Program Participant Response
1)		
2)		
3)		

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CHAPTER 3:

Program Evaluation

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Program Evaluation Measures Proper Execution and Desired Impact

The process for identifying or developing program evaluation measures begins well in advance of implementing a prevention program. This chapter provides guidance to plan and administer an outcome evaluation for a prevention program.

Two Types of Evaluations

There are two main types of evaluation: *process evaluation* and *outcome evaluation*.

Process evaluations analyze the administration of the program, while *outcome evaluations* assess achievement of program outcomes of interest.

A process evaluation answers questions that address program administration such as:

- **Were there any changes in program material covered?**
 - If not, what material was removed from the original program, and was the material conveyed in another manner (e.g., handouts, pre-program reading materials)?
 - If the material contained additional information than the original program, what was the nature and placement of the additional information?
 - Did additional/new groups of service members receive the materials?
 - Were these materials delivered in a new way?
- **How many service members received the materials?**

An outcome evaluation answers questions that address program goals such as:

- **Did program participation change reactions, learning, behavior or results? For example, were there changes in:**
 - Understanding what constitutes consent
 - Recognizing different forms of sexual harassment
 - Endorsement of sexual harassment myths
 - Number of sexual harassment experiences

Both process and outcome evaluations are important for understanding whether a prevention program has achieved its identified goals. If there are problems with the implementation process (i.e., the facilitator did not receive appropriate training, the training space was unsuitable), it can have an impact on program outcomes. Only outcome evaluations, however, inform us whether a program met the learning objectives and produced the changes in reactions, learning, behavior and results.

How to Collect Process Evaluation-Related Data

In this section, we identify and describe three types of process evaluation data: participant characteristic data, program fidelity data, and participant satisfaction data.

Process Evaluation Type 1: Participant characteristic data

Participant characteristic data provides insights into successes and challenges related to program administration. Remember to collect participation information at the beginning of each program session to understand the nature of your audience (i.e., gender, rank, military occupational specialty).

For example, consider questions such as:

- What percentage of service members or civilians attended the program?
 - Who was more likely to attend the program – junior or senior service members, supervisors or non-supervisors?
- Was it a stand-alone training or included in a broad-scale training evolution?



Process Evaluation Type 2: Program fidelity data

The manner of the program presentation may affect the success of a program. Fidelity is the term used to describe how closely the program implementation adheres to the original plan for implementation. After each implementation of the program is over, identify and describe differences between actual and planned implementation.

On the day of implementation, assign a person to check fidelity. This person should observe and document what aspects of program implementation are unfolding according to plan, as well as revised, ignored, or overemphasized parts of the program implementation process. The person assigned to check fidelity should also record their own observations about what appears to be working well, or less well, with participants. They can summarize their notes following program delivery. Compare these notes with original program adaptations to determine whether the facilitator delivered the program in the intended manner.

The implementation fidelity worksheet (see *Appendix J*) at the end of this chapter is a guideline for the areas to monitor. Use the program overview form to track all the questions outlined in this chapter.

Participant satisfaction may affect the success of a program.

Process Evaluation Type 3: Participant satisfaction data

Participant satisfaction may affect the success of a program. Organizations often use satisfaction surveys to identify gaps in content and tailor materials to the unique needs of the audience.

However, participant satisfaction surveys do not determine achievement of learning objectives. Program participants may indicate that they were generally satisfied with the program and that they learned something, but a satisfaction survey does not assess whether participant learning increased specific knowledge, skills or outcomes of interest. For this reason, collect participant feedback to guide revisions or changes to your program implementation approach. These considerations may come from common themes raised by participants, evidence of disconnects between program messaging and the audience, as well as instructor strengths and weaknesses.

Questions that participant satisfaction data can answer include:

- Were participants comfortable in the physical space?
- Were participants satisfied with the facilitator's presentation style?
- Were the materials engaging and easy to understand?
- Were the materials relevant to the target audience?

Satisfaction data is easiest to collect through a paper or online survey given to participants at the end of the program.

How to Collect Outcome Evaluation-Related Data

Outcome evaluation data collection tools

Survey questions (pre and post assessments) are often used to obtain outcome evaluation data. For example, the *Defense Equal Opportunity Climate Survey* measures unit cohesion based on responses to questions that ask participants to indicate solidarity within their unit.

If your program does not include such a survey, you may find measures that have been previously tested (validated) to support your assessment questions by:

- Examining peer-reviewed research articles about the prevention program or similar programs to validate measures
- Contacting researchers who are able to recommend validated measures to assess the outcomes of interest
- Asking colleagues or a higher headquarters research team if they have recommended survey questions

If the program does not include an existing evaluation, you may find useful outcome measures in the following resources:

- [Measures of Performance and Effectiveness for the Marine Corps Sexual Assault Prevention and Response Program](#) (available through the RAND website)
- Department of Defense: Guidebook Data Snapshot Tool for Prevention Program Evaluation (available through [DoD SAPR Connect](#))
- [U.S. Centers for Disease Control and Prevention: Measuring Violence-Related Attitudes, Behaviors, and Influences Among Youths: A Compendium of Assessment Tools \(Second Edition\)](#) (available through the CDC website)

Work with your legal team to determine if survey items are copyrighted and the best approach for requesting permission. You may also need to engage your research and/or information collections offices to obtain necessary approvals prior to survey administration. See *Appendix K* at the end of this chapter for a program overview worksheet to help track important information, data and outcomes.

Benefits of using existing measures

Measures that have already been developed provide greater confidence in evaluation results given the rigorous testing needed to create reliable and valid measures. Such measures allow prevention program managers to determine whether implementing the prevention program was more or less effective than previously thought. Existing measures can also facilitate a standardized comparison of knowledge, behaviors and outcomes across audiences, groups, etc. Evidence collected through existing measures can be used to guide decision-makers in implementing a prevention program more broadly.

In **Table 3.1**, we provide an example of a completed worksheet for helping to plan an outcome evaluation. This Table prompts the user to think about the knowledge, skills or behaviors, attitudes and outcomes that they want to measure, the name of the measurement tools used, and details on where to find additional information on each measure (such as a link to a website or reference to an article).

Table 3.1: Example Measures

Evaluation outcome	Concept to measure	Existing measurement tool	Where measurement tool is located
Knowledge	Knowledge about myths and facts about sexual violence	Grade 9: Sexual Assault Myths and Facts Answer Key	Sexual Assault Myths and Facts Answer Key
Attitudes	Attitudes towards rape	Illinois Rape Myth Scale	Office of Population Affairs: Adolescent Health Payne, D. L., Lonsway, K.A., & Fitzgerald, L. F. (1999). Rape Myth Acceptance: Exploration of Its Structure and Its Measurement Using the Illinois Rape Myth Acceptance Scale . Journal of Research in Personality, 33(1), 27-68.
Behavioral Intention	Intention to intervene to prevent violence	Readiness to Help	Prevention Innovations Research Center. (2015). Evidence-Based Measure of Bystander Action to Prevent Sexual Abuse and Intimate Partner Violence: Resources for Practitioners (Short Measure) . Durham: University of New Hampshire. Banyard, V. L., Moynihan, M. M., Cares, A. C., & Warner, R. A. (2014). How Do We Know If It Works? Defining Measurable Outcomes in Bystander-Focused Violence Prevention . Psychology of Violence 4, 101-115.
Outcomes	Dating abuse perpetration scale	Dating Abuse Perpetration Acts	Dating Abuse Perpetration Acts Scale

When to collect data

At a minimum, outcome evaluation requires data collection from participants at least two different times: once before the program starts (pre-test) and once after the program ends (post-test).

Data entry

Administering pre- and post-tests with pen and paper requires additional care when entering the data into a database or spreadsheet. To reduce the potential

for error in data entry, set parameters for each of your responses so that entries that fall outside these parameters are flagged and updated with the correct information.

To link pre- and post-test data, assign a unique participant identification code to each participant's data. This code often includes a string of numbers, letters or characters that highlight which pre-test and post-test should be paired. There are several benefits to unique participant identification codes. Notably, unique codes:

- Decrease the likelihood of identifying the participant so results remain confidential
- Simplify the process for linking data from the same participant
- Allow you to track participants in a single database, and to store all pre- and post-test data in the same entry.

Unique participant identification codes are required for human research programs that fall under the Department of the Navy Human Research Protections Program. Be sure to check with your headquarters component or Institutional Review Board on whether you have followed all the necessary human research protection procedures prior to collecting data.

Data analysis

Statistical software (i.e., SPSS, SAS) or Microsoft Excel are common tools used to perform data analyses, and several online resources are available that provide tutorials for calculating statistics. Some Services have internal evaluation subject matter experts available to support you. Check with your higher headquarters office for additional contacts.

Data storage

Protecting participant privacy is of paramount importance, particularly when collecting sensitive data about sexual assault or harassment.



It is essential to understand how an online data collection system stores data. If personally identifying information is present in the dataset, which might include a Sailor or Marine's name or ID number, protocols must be in place for downloading and storing those data so that unauthorized personnel cannot determine what responses someone gave on the evaluation surveys. If data collection is accomplished using a paper method, then secure personally identifying information and survey data in separate locations or files.

In some cases, combinations of the following participant characteristic data could unintentionally make the data you collect identifiable including:

- sex
- race/ethnicity
- age
- position
- rank

Example: If there are few Latino, female, midshipmen / 9-year-olds—it would not be hard to figure out which survey belongs to which midshipman. In such cases, the nature of data in a report is equally as important as secure data storage. A best practice is to resolve these challenges in advance as a part of developing the implementation plan.

KEY TAKEAWAY MESSAGES:

- Program evaluation enables the measurement of program objectives.
- The two main types of evaluation are process evaluation and outcome evaluation.
- Process evaluations provide insights into the execution and effectiveness of program administration procedures. These processes include the facilitator's engagement with the participants, and if the program location was conducive to participant learning.
- Outcome evaluations allow you to assess whether the program achieved its objectives. The Kirkpatrick Model (Chapter 1) is a framework for assessing intervention program outcomes: reactions, learning, behavior change and results.
- Tasks for Effective Prevention Program Evaluation:
 - Identify the key components of process evaluation (i.e., participant characteristic data, fidelity data, etc.)
 - Select outcomes that help determine if the program learning objectives were met
 - Use established measures
 - Develop a strategy to collect pre- and post-test data
 - Define a process for secure data storage and the protection of personal identifiers

Prevention Program Implementation and Evaluation Toolkit

Appendix J: Implementation Fidelity Worksheet

This worksheet is a guide for elements of the program implementation process that are important to maintaining fidelity, including:

- ☐ Length of implementation sessions: i.e., Did you cover 1) all sections of the program and 2) all program materials in the allotted time? If not, describe:

- ☐ Did specific sections require more or less time than the recommended amount of time suggested? Describe:

- ☐ Was there sufficient time to conduct program activities in the allotted time (i.e., how much time did activities take and was this sufficient?). If not, describe:

- ☐ Approximately what percentage of participants engaged during opportunities for discussion? Describe:

- ☐ Where did the facilitator go 'off script' or deviate from the program materials (specific program sections or content)? What was the purpose of the deviation (i.e., to offer an opinion, share a story, connect with the audience, etc.?)

- ☐ Were any program materials removed, added, or changed? Describe:

- ☐ Were DoD and Service specific policies were conveyed accurately? Describe:

Prevention Program Implementation and Evaluation Toolkit

Appendix K: Program Overview Form

Program Name
<ul style="list-style-type: none"> Date and time Location, room number Command (or target audience)
Program Adaptations
<ul style="list-style-type: none"> Provide a few sentences describing how you modified the program to meet your team needs, including reducing the number of sessions, increasing session length. Include a sentence or two describing why you made these modifications for your Command (see toolkit chapter 3).
How Process Evaluation Data Were Collected
<p>Provide 2-3 sentences describing how the process data were collected</p>
Process Evaluation Report
<ol style="list-style-type: none"> 1. Participant characteristic data 2. Fidelity data 3. Participant satisfaction data
How Outcome Evaluation Data Were Collected
<ol style="list-style-type: none"> 1. List outcome measures used. 2. Do measures reflect the changes you would expect to see based on participation in the program? <ol style="list-style-type: none"> a. For example, if you wanted to increase participants' knowledge of the three methods of bystander intervention (i.e., distract, delegate, direct), did you measure participant knowledge of these methods prior to and after the program was implemented? 3. Who collected data? 4. Where and when were data collected (i.e., when were pre-test and post-test data collected?) 5. How were data collected (i.e., online survey, paper and pencil, etc.)? 6. Indicate whether your analysis linked individuals by ID numbers or analyzed data for the pre-test group vs. the post-test group.
Outcome Evaluation Report
<p>Using outcome data, describe changes in participant pre-test and post-test scores.</p>
Lessons Learned
<p>Describe what parts of program implementation you would sustain, what you would change, and what you would do differently.</p>

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CHAPTER 4:

Program Implementation

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Successful Intervention Programs Have an Implementation Plan

Chapter 4 provides guidance for successful implementation of a prevention program and ways to address common challenges encountered during the implementation process. Use the leadership meeting worksheet at the end of this chapter (see *Appendix L*) as a quick reference tool.

Step 1: Meet with Leaders

Securing buy-in from leaders is an essential step for implementing any prevention program. It is especially critical because commanders set the tone—and can often make a program more successful, especially when they echo the program’s key messages. Meet with your supervisor or team leader to discuss the proposed plan for implementing the program. There are several objectives to accomplish during these meetings:

- a. Provide a summary of the prevention program, performance gaps the program is intended to address, and the reasons why the selected program is best suited to help close these gaps.
- b. Provide an overview of your implementation plan.
- c. Provide a synopsis of your program evaluation plan.
- d. Identify proposed next steps including requests for leader support.

Prevention Program Summary

- Provide leaders with background information on the problem that the prevention program is intended to solve, and how the program supports the command’s goals.
- Summarize information on:
 - The relevance of the program: Define the problem that needs to be solved, preferably in terms of performance/readiness gaps
 - Program goals: Measure changes in outcomes of interest that lead to the desired results leadership is seeking
 - Evidence of the program’s success with audiences in the past
 - Planned adaptations from the original program

Program Implementation Plan

Following a summary of the prevention program and its intended impacts, succinctly describe key elements of its implementation in the leadership brief:

Key Areas Addressed in this Chapter Include:

- ☐ Meet with leaders
- ☐ Prepare for implementation and staffing needs
- ☐ Prepare program materials
- ☐ Develop a well-designed evaluation plan
- ☐ Prepare process evaluation forms
- ☐ Communicate with stakeholders throughout program implementation



- Key program staff required for implementation including facilitators, support personnel (i.e., logistics, administrative personnel, IT specialists), and master trainers, etc.
 - Acknowledge the competition for time and talent and how you will mitigate these challenges
- Plan for training key program staff (if applicable)
- Overview of how you will implement the program including information on:
 - Timeline for rollout
 - Program length (i.e., 1 hour, 3 days, etc.),
 - Format for program administration (i.e., in person, online, small group discussions)
 - Program audience

Program Evaluation Plan

Provide an overview of your proposed plan for evaluating the impact of the prevention program.

Areas to cover include:

- Describe the data needed for evaluation purposes and how these data align with program goals
- Identify questions the evaluation will answer (e.g., “What percent of Marines have acted as bystanders in the past month according to the post-test as compared to the pre-test?”)
- Briefly explain how appropriate data collection and storage procedures will be followed
- Provide an overview of how any findings or trends from outcomes analysis will be reported or shared with leadership, program staff, and participants.
- Address any expected challenges with your plan and your approach for mitigating these issues

Next Steps

After your brief:

- Clarify any questions or concerns regarding the proposed approach
- Obtain concurrence to move forward
- Identify and request resources needed (i.e., time, space, funding, personnel)
- Request support for participation

Step 2: Prepare for Implementation and Staffing Needs

While every prevention program is different, **Table 4.1** provides examples of how many staff you may need to assist with implementation. If implementing a program that involves a presentation or workshop with a large group (e.g., 40 participants), additional people (3-5) may be required to support on the day of implementation.

Table 4.1: Example table for 3-hour prevention program to be administered on Day 1 (these numbers are estimated to provide planning guidance)

Table 4.1: Example Measures

Program or evaluation-related need	Number of people needed	For what time period
Prepare the meeting room before audience arrives	2	2 hours on Day 1
Operate the technology that shows the program-related video	1	3 hours on Day 1
Introduce the discussion group facilitator	1	N/A
Training of group facilitator's ('Train the Trainer' session)	3	8 hours of online training during previous month, plus 3 hours on Day 1
Take attendance	1	1 hour on Day 1
Hand out pre-test surveys when participants arrive; collect surveys and seal in envelope	2	1 hour on Day 1
Implement the program	2	3 hours on Day 1
Hand out post-test surveys at the program conclusion; collect surveys and seal in envelope	2	1 hour on Day 1
Enter data into spreadsheet after program	1	40 hours between Day 2 and Day 15
Analyze data	1	40 hours between Day 15- Day 30
Graphic design to prepare evaluation report for leadership	1	40 hours between Day 31- Day 40

Staff Training

Train each staff person on the specific activities associated with their role. Consider the following:

- The program implementation leader should define each team member's role in program implementation, regardless of the experience of members on the support staff team
- The amount of training that staff require should be commensurate with their assigned duties (i.e., someone taking roll call may only need ten minutes of your time, compared to the staff delivering program-related content or collecting evaluation-related data)
- Schedule training sessions well in advance of program implementation to ensure your team is ready

Step 3: Prepare Program Materials

Think about preparing and distributing materials for participants to review prior to the program implementation. Some prevention programs include prepared handouts, posters, and other materials.

- Make provisions for sufficient materials to accommodate more than the expected number of participants
- Determine the distribution of materials; identify and share materials that require review or completion in advance (i.e., print, email or post online program materials as appropriate)
- Schedule prevention program material production well in advance of the actual session

Step 4: Develop a Well-designed Evaluation Plan

Review Chapter 3 for tips on pre- and post-tests, data entry and storage, and additional considerations.

Pre- and post-tests

The pre- and post-tests can be administered with pen and paper or using DON or DoD-approved survey programs.

Data entry

Have a plan for collecting the pre- and post-test data. One option is to leverage DoD SAPRO's Data Snapshot Tool (available through [DoD SAPRO Connect](#)) which provides a catalogue of validated and reliable measures for tracking program progress, along with a semi-automated platform for summarizing findings.

Human research protections

Work with your headquarters office to determine if your program falls under the scope of human research protections that require additional ethical considerations, including coordination with your Service's Institutional Review Board. Consult an expert who makes those determinations.

For more information on human research protections, visit [The Office of Naval Research \(ONR\)](#), [Human Research Protection Program \(DON HRPP\)](#).

DON HRPP is a headquarters element that provides oversight and monitoring of human research protection activities across the Navy and Marine Corps.

Process evaluations assess whether the program was administered as planned and provide insights on specific areas for improvement.

Step 5: Prepare process evaluation forms

Table 4.2 provides an example of a process evaluation tracking form to track how a program is implemented and any issues that might have interfered with the program implementation.

- For instance, did one person dominate the discussion despite the facilitator's effort to redirect the conversation?
- Or perhaps the facilitator skipped a key prevention program exercise due to time restrictions because participants arrived late.

A process evaluation can give insights into why your program succeeded and will provide lessons for your future efforts. Developing a table like the one below (**Table 4.2**) may help provide items to include in your process evaluation.

Table 4.2: Example Process Evaluation Tracking Form

Program component	Implemented as planned	Explanation
Participant sign-in	Yes	Participants were checked-in quickly and sat down and completed online pre-test
Pre-test implementation	Yes	Participants were able to access 10-minute pre-test on their phone or laptop
Program introduction preparation	Yes	Team leader provided with key talking points for introduction and time allocated for introduction
Program introduction implementation	Yes	Team leader spoke for allotted time and linked talking points to importance to broader mission
First program section	No	Participants did not actively engage in dialogue. Facilitator should consider small group discussion, reframing of questions or additional probes to encourage engagement.
Second program section	No	Ran out of time and did not finish presenting all the material in second section



Step 6: Communicate with Stakeholders throughout Program Implementation

Develop a plan to communicate at regular intervals with the implementation team and leadership throughout the program implementation process to share progress and troubleshoot anything that is not going according to plan. Unexpected challenges may surface during the implementation stage:

- Is the team currently navigating a change in leadership and/or strategic direction?
- Is your program competing with a short deadline that could distract participants?
- Did you schedule program implementation during times when other critical command activities take place (i.e., physical training, lunch, etc.)?

Reducing these potential distractions up-front will increase the chance for program implementation success.

Schedule check-ins with leaders and key stakeholders before, during and after program implementation to identify and mitigate challenges and reinforce the need for support of the program. As part of routine updates, consider using a quad chart or Program Objectives and Milestones (POAM) template to convey program objectives and goals, schedule (progress), challenges and upcoming milestones.

KEY TAKEAWAY MESSAGES:

- Implementing a program requires comprehensive planning that engages leaders, the implementation team and training staff.
- Key tasks for program implementation include meeting with leaders, preparing for implementation and staffing, preparing program materials, developing an evaluation plan, preparing process evaluation forms and communicating with stakeholders throughout the program implementation process.

Prevention Program Implementation and Evaluation Toolkit

Appendix L: Leaders Meeting Worksheet

Your first step is to meet with leaders to discuss your proposed plan for implementing the selected prevention program. There are several objectives to accomplish during the meeting with leadership.

Objectives	Synopsis
Provide a summary of the prevention program	<p>Answer the 5Ws:</p> <ul style="list-style-type: none"> • Who is the target audience of the program? • What aspects of prevention does the program cover? • When will the program be implemented (over what period of time)? • Where will the program be implemented (locations)? • Why is the program important for addressing performance gaps? <p>Where Possible, Summarize:</p> <ul style="list-style-type: none"> • Program goals – stated in a way that allows you to measure changes in knowledge, skills, attitudes, and/or other outcomes • The relevance of the program to your audience, to include prior evidence of successful implementation • Any planned adaptations from the original program
Provide an overview of your implementation plan	<p>Identify:</p> <ul style="list-style-type: none"> • Key program staff required for implementation (i.e., facilitators; support personnel such as logistics, administrative personnel and IT specialists; master trainers, etc.) • A plan for training key program staff <p>Provide Information on:</p> <ul style="list-style-type: none"> • Timeline for rollout • Program length (i.e., 1 hour, 3 days, etc.), • Format for program administration (i.e., in person, online, small group discussions) • Program audience
Provide a synopsis of your training and evaluation metrics	<ul style="list-style-type: none"> • Describe the data you will collect for evaluation purposes and how these data align with program goals • Describe how you will collect and store the data • Identify questions the evaluation will answer (e.g., “What percent of Marines have acted as bystanders in the past month according to the post-test as compared to the pre-test?”)
Identify proposed next steps including requests for help from leadership	<ul style="list-style-type: none"> • Ask leaders what, if any, challenges they anticipate with your plan? • Obtain leadership’s commitment to providing the resources needed to effectively implement your program (i.e., time, space, training support) and encourage program participation



Prevention Program Implementation and Evaluation Toolkit

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